

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000058015

FILED  
Jan 30, 2004  
Secretary of State

**Entity Name:** ALCOHOL & SUBSTANCE ABUSE PREVENTION PROGRAMS, INC.

**Current Principal Place of Business:**

4920 WEST CYPRESS STREET  
SUITE 102  
TAMPA, FL 33607

**New Principal Place of Business:**

**Current Mailing Address:**

4920 WEST CYPRESS STREET  
SUITE 102  
TAMPA, FL 33607

**New Mailing Address:**

**FEI Number:** 59-3724085

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
343 ALMERIA AVENUE  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

HEATHER MCENERY  
4920 W CYPRESS STREET  
102  
TAMPA, FL 33607 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: HEATHER MCENERY

01/30/2004

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: V ( ) Delete  
Name: PETTYJOHN, HEATHER  
Address: 4920 WEST CYPRESS ST., STE 102  
City-St-Zip: TAMPA, FL 33607

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: V (X) Change ( ) Addition  
Name: MCENERY, HEATHER  
Address: 4920 WEST CYPRESS ST., STE 102  
City-St-Zip: TAMPA, FL 33607

Title: P ( ) Change (X) Addition  
Name: PETTYJOHN, CHARLES  
Address: 4920 W CYPRESS STREET, SUITE 102  
City-St-Zip: TAMPA, FL 33607

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES PETTYJOHN

P

01/30/2004

Electronic Signature of Signing Officer or Director

Date